# TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*
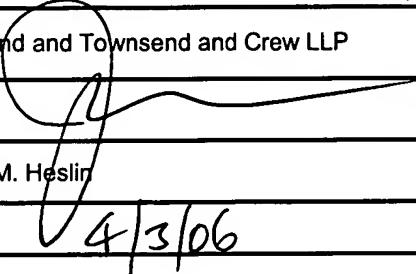
| | |
|---|---|
| Application Number | 10/764,127 |
| Filing Date | January 23, 2004 |
| First Named Inventor | Zdeblick, Mark |
| Art Unit | 3737 |
| Examiner Name | Unassigned |
| Attorney Docket Number | 021308-000810US |

Total Number of Pages in This Submission

## ENCLOSURES *(Check all that apply)*

- [ ] Fee Transmittal Form
  - [ ] Fee Attached
- [ ] Amendment/Reply
  - [ ] After Final
  - [ ] Affidavits/declaration(s)
- [ ] Extension of Time Request
- [ ] Express Abandonment Request
- [ ] Information Disclosure Statement
- [ ] Certified Copy of Priority Document(s)
- [ ] Reply to Missing Parts/ Incomplete Application
  - [ ] Reply to Missing Parts under 37 CFR 1.52 or 1.53

- [ ] Drawing(s)
- [ ] Licensing-related Papers
- [ ] Petition
- [ ] Petition to Convert to a Provisional Application
- [x] Power of Attorney, Revocation Change of Correspondence Address
- [ ] Terminal Disclaimer
- [ ] Request for Refund
- [ ] CD, Number of CD(s) _____
  - [ ] Landscape Table on CD

- [ ] After Allowance Communication to TC
- [ ] Appeal Communication to Board of Appeals and Interferences
- [ ] Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
- [ ] Proprietary Information
- [ ] Status Letter
- [x] Other Enclosure(s) (please identify below):

Return Postcard

**Remarks** The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|---|---|
| Firm Name | Townsend and Townsend and Crew LLP |
| Signature | |
| Printed name | James M. Heslin |
| Date | 4/3/06 |
| Reg. No. | 29,541 |

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.
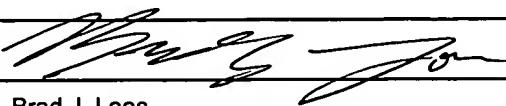
| | | | |
|---|---|---|---|
| Signature | | | |
| Typed or printed name | Brad J. Loos | Date | 04/04/06 |

60717240 v1

# REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS

| | |
|---|---|
| Application Number | 10/764,127 |
| Filing Date | January 23, 2004 |
| First Named Inventor | Zdeblick, Mark |
| Art Unit | 3737 |
| Examiner Name | Unassigned |
| Attorney Docket Number | 021308-000810US |

To: **Commissioner for Patents**
**P.O. Box 1450**
**Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

☐ all the attorneys/agents of record

☐ all the attorneys/agents (with registration numbers) listed on the attached paper(s), or

☒ all the attorneys/agents associated with Customer Number  **20350**

> NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:   Client requests transfer of matter to firm listed below.

## CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.

2. ☒ Change the correspondence address and direct all future correspondence to:

☒ The address associated with Customer Number:  **24353**

*OR*

| ☐ Firm *or* Individual Name | |
|---|---|
| Address | |
| City | State | Zip |
| Country | |
| Telephone | Fax |
| Signature | |
| Name | James M. Heslin | Registration No. | 29,541 |
| Date | 4/3/06 | Telephone No. | 650-326-2400 |

*NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.*

60737749 v1